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RECIPIENT/ PHONE NO.	FAX NO.	COMPANY/ CITY, STATE, COUNTRY
TC3700 Examiner Barry Pass	1.703.872.9302	USPTO Arlington, VA

Michael A. Bertelson
FROM _____ 3
5418 PAGES (WITH COVER)
REFERENCE NO. 50642/270979
CLIENT/MATTER NO. _____

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COMMENTS

The "Return Receipt" of facsimile transmission of the U.S. Patent and Trademark Office will acknowledge receipt of:

Applicant:	Christopher P. Carson	
Title:	Surgical Navigation Systems and Processes for High Tibial Osteotomy	
Serial No./Docket No.:	10/084291	50642/270979
Filing Date	February 27, 2002	

PAPERS SUBMITTED:

1. Transmittal Form No. PTO/SB/21; and
2. Status Inquiry.

Date: November 3, 2003
By: Michael A. Bertelson, Reg. No. 54,713

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	10/084,291
		Filing Date	02/27/2002
		First Named Inventor	Christopher P. Carson
		Group Art Unit	3737
		Examiner Name	Barry Pass
Total Number of Pages in This Submission		Attorney Docket Number	50642/270979

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input checked="" type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Michael A. Bertelson, Reg. No. 54,713 KILPATRICK STOCKTON LLP
Signature	
Date	Nov. 3, 2003

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office, fax no. 703.872.9302, TC.3700 on

11/3/2003

Typed or printed name	Janie Wilkins
Signature	
Date	11/3/2003

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

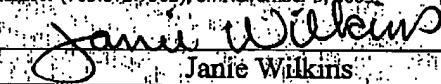
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APPLICANT: Christopher P. Carson
 SERIAL NO.: 10/084,291 GROUP ART UNIT: 3737
 FILED: February 27, 2002 EXAMINER: Barry Pass
 FOR: SURGICAL NAVIGATION SYSTEMS
 AND PROCESSES FOR HIGH TIBIAL
 OSTEOTOMY

ATTORNEY DOCKET NO.: 50642/270979

CERTIFICATE OF FACSIMILE TRANSMISSION

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 Janie Wilkins

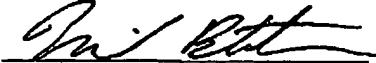
Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313/1450

STATUS INQUIRY

Dear Sir:

Pursuant to M.P.E.P. § 203.08, the undersigned attorney of record inquires as to the status of the above-identified application. The referenced application was filed on February 27, 2002. No apparent action has been received. The undersigned respectfully requests notification of the status.

Respectfully submitted,


 Michael A. Bertelson
 Reg. No. 54,713

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